PSJ17 Exh 86

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2012 *FENTORA* Brand Plan

Draft – November 2011

FENTORA®
fentanyl buccal tablet CII
Relief beyond the flare

Update to Teva logo

FOR INTERNAL PURPOSES ONLY – NOT FOR USE IN PROMOTION. This document is for discussion purposes only and has not been approved by senior management. All sales and marketing activity shall be strictly limited to the indications currently listed in the product's package insert. This document contains proposed marketing and promotional strategies, tactics, and programs, as well as market research and other similar programs, all of which will only be developed and implemented after appropriate review and approval has been obtained in accordance with company policies (e.g., CARE, PDRC, or Legal/Compliance review).

Detailed Agenda

- Executive Summary
- Market Situation Analysis
  - Market Overview
  - Competitive Landscape
  - Target Audiences
  - TIRF
- Product Situation Analysis
  - Financial Results (2011)
  - Customer Perceptions
  - REMS impact
  - Sales Force Size & Structure
  - Payer Situation
- Issues & Opportunities
  - SWOT, Key Issues
- Brand Strategy
  - Indication, Vision, Positioning, Strategic Map, Messaging
  - Tactical Plan & Timing
    - Med Ed/Speaker Programs, Pubs, PR, HCP Promotion, REMS, Market Research, Managed Markets
- Budget

Executive Summary

Need to update

- Fentora is an effective yet underutilized brand
- Fentora has a small prescribing base, REMS hurdles, dosing confusion, and a lack of clear positioning in the doctor's mind
- In 2012, Teva will efficiently execute programs to
  - Clearly differentiate Fentora within the market
  - Mitigate prescribing hurdles
  - Solidify and expand the prescribing base
  - Establish clear triggers on when to utilize Fentora

The Process


Market Situation
Brand Situation
Issues/Opportunities
Brand Strategy
Programs/ Tactical Plan

Market Situation

Market Landscape

- Need a slide on the opioid market in general
- Get from Sheila Joe McHale

Add competitive – slide 57

Target Audience

H4B Chelsea to update – Message Recall (targeting email)

How do we name these docs in a way that tells reps how to message

Audience	Description	Opportunity
Field Sales Force	▪ 71 reps ▪ X DMs ▪ X RDs/ X DAE / X SD Corporate Accts. ▪ X NAE / X AE / X Gov / X Instit / X Trade	▪ Protect/Grow
Fentora Prescribers (8-10) XXX # of Prescribers	▪ XX East Region (XX%) ▪ XX West Region (XX%) ▪ Highest opioid & ROO comfort & productivity ▪ Likely influencers of others due to experience	▪ Protect ▪ Grow (Writing Intensity)
TIRF Prescribers (5-10) XXX # of Prescribers	▪ XX East Region (XX%) ▪ XX West Region (XX%) ▪ Less comfortable with ROOs ▪ Driven more by patient request, efficacy, samples	▪ Protect ▪ Grow (Unique Prescribers)
Oncologists	▪ Limited Opioid & ROO experience	▪ Grow selectively ▪ Non-personal
Skilled Opioid Prescribers (H targets)	▪ Exhibit similar behavior to Mid-decile prescribersXXXX Whitespace XXXX	▪ Grow selectively ▪ Non-personal

Oct 2010	Nov 2010	Dec 2010	Jan 2011	Feb 2011	Mar 2011	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011

Previous Period
Oct 2010 – Mar 2011

Current Period
Oct 2010 – Mar 2011

FROH Targets will be defined in both time periods using the same criteria

- Allow for forward looking analysis of how each group performs based on call frequencies
- Show current landscape of targets and their respective growth

F: FENTORA Decile 2-10
R: Additional ROO Decile 5-10
O: Additional ONCs LAO Decile 4-10 and PSAO Decile 4-10
H: Additional LAO Decile 5-10 and PSAO Decile 5-10

TRx Growth: Oct 2010 – Mar 2011 vs. Apr 2011 – Sep 2011
Calls: Average calls/month in Apr 2011 – Sep 2011
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

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FROH Target Movement: Previous 6 months vs. current 6 months

		Previous Targets (Oct 2010 – Mar 2011)					
		F	R	O	H	Non Target	Total
Current Targets (Apr 2011 – Sep 2011)	F	885	47	24	161	151	1,268
	R	34	236	3	47	37	357
	O	13	6	933	0	597	1,549
	H	152	69	0	6,401	1,523	8,145
	Non Target	156	46	614	1,244	326,896	328,956
	Total	1,240	404	1,574	7,853	329,204	340,275

Current F Targets:

- 70% came from previous F Targets
- 6% came from previous R and O Targets
- 24% came from previous H or Non-Targets

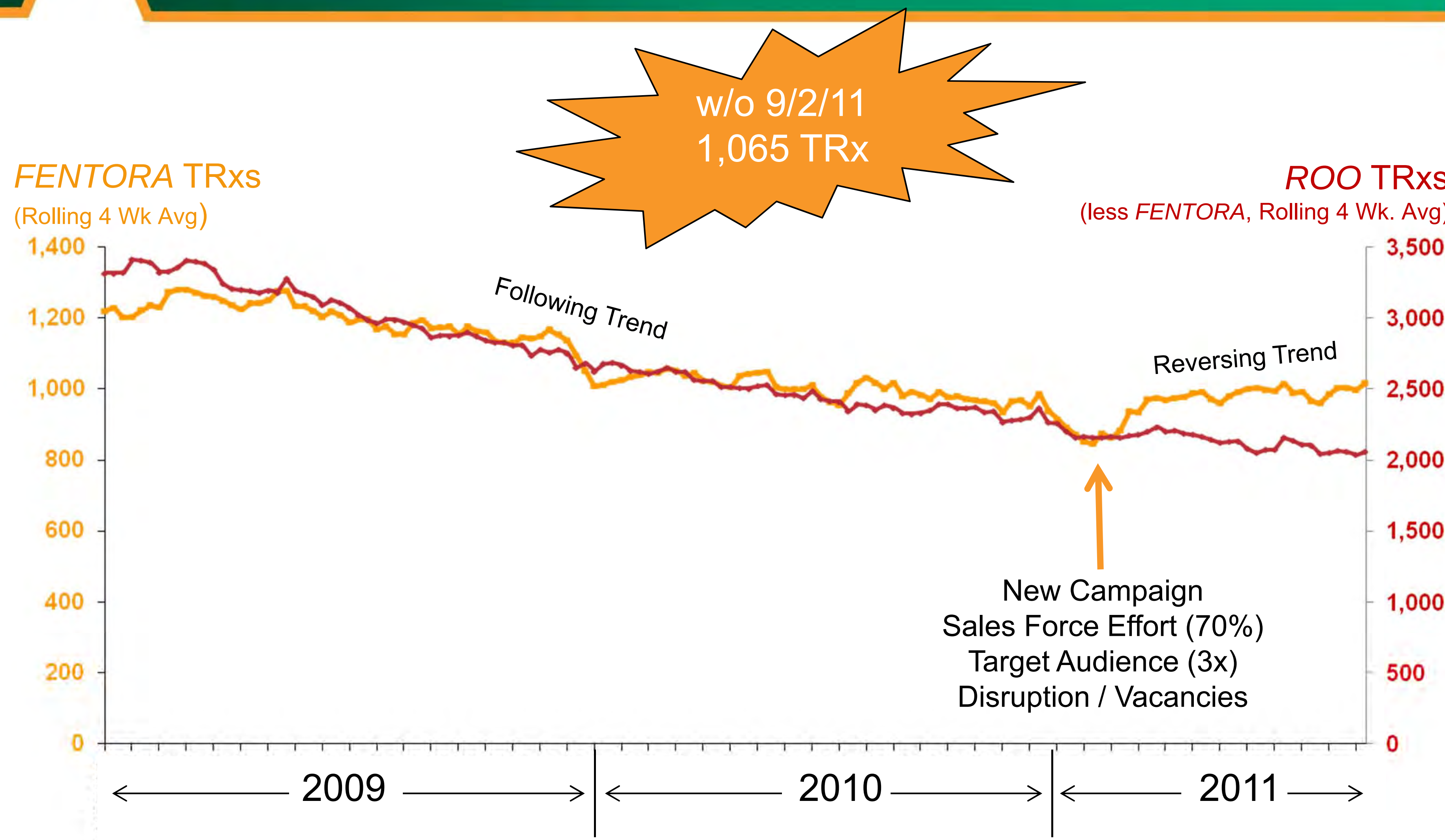
Current and Previous targets based on same criteria in respective time periods
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

TIRF TOE

- Contact Paula Castagno for a slide/info

Brand Situation

FENTORA and ROO (Less *FENTORA*) Weekly TRxs



Source: IMS NPA Weekly TRxs

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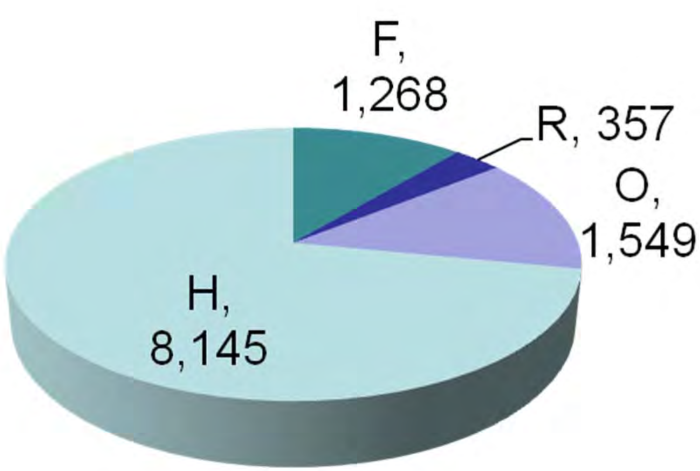
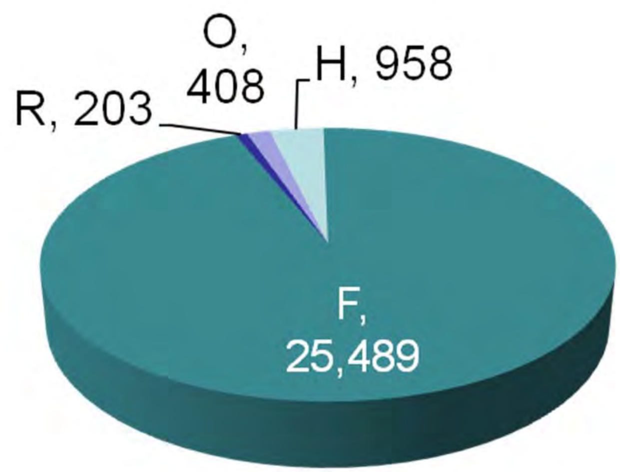
FROH Target Count
(Apr 2011 – Sep 2011)



FROH TRx
(Apr 2011 – Sep 2011)



F Targets make up 11% of the total targets and account for 94% of FENTORA TRx

Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

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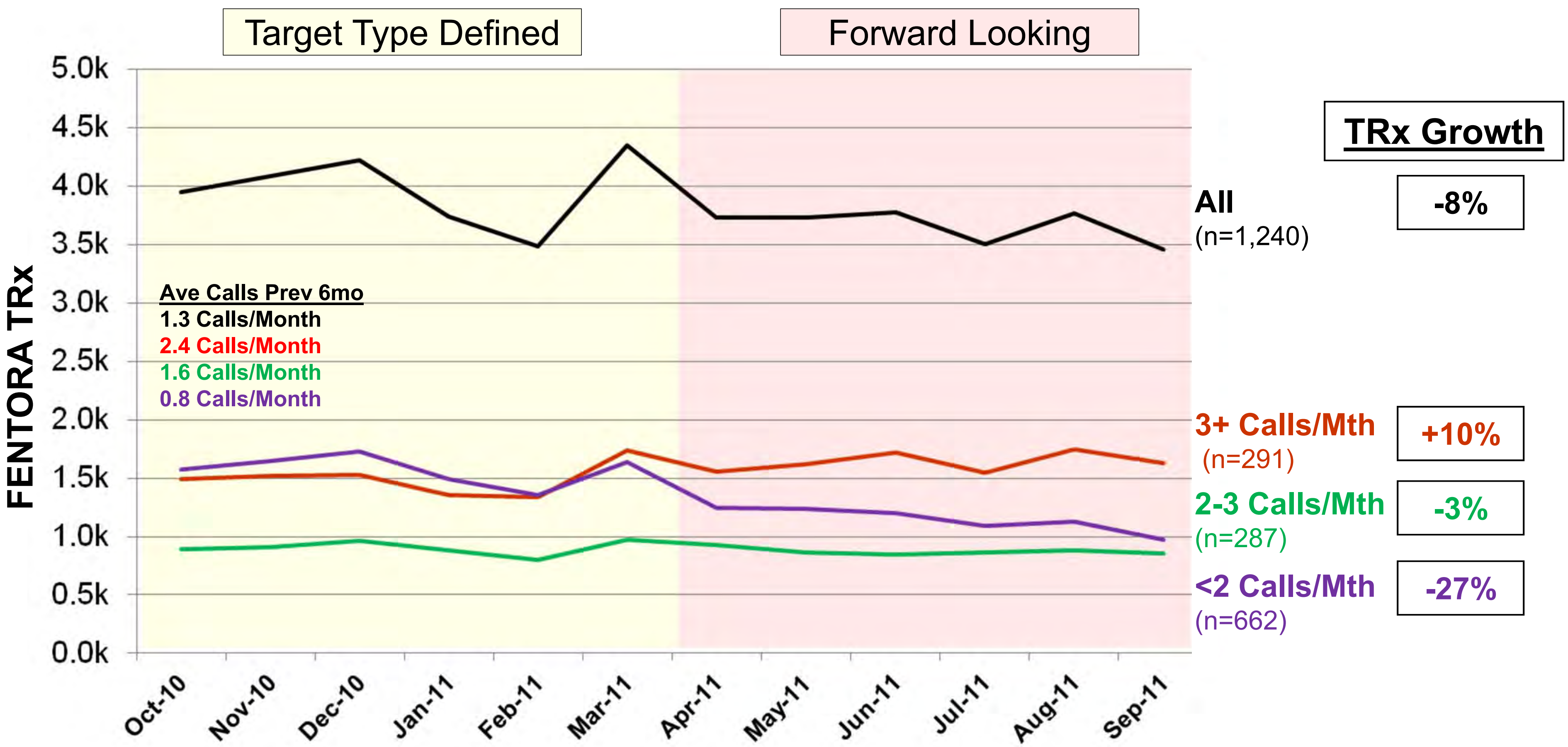
FENTORA Growth by Call Count - F Targets



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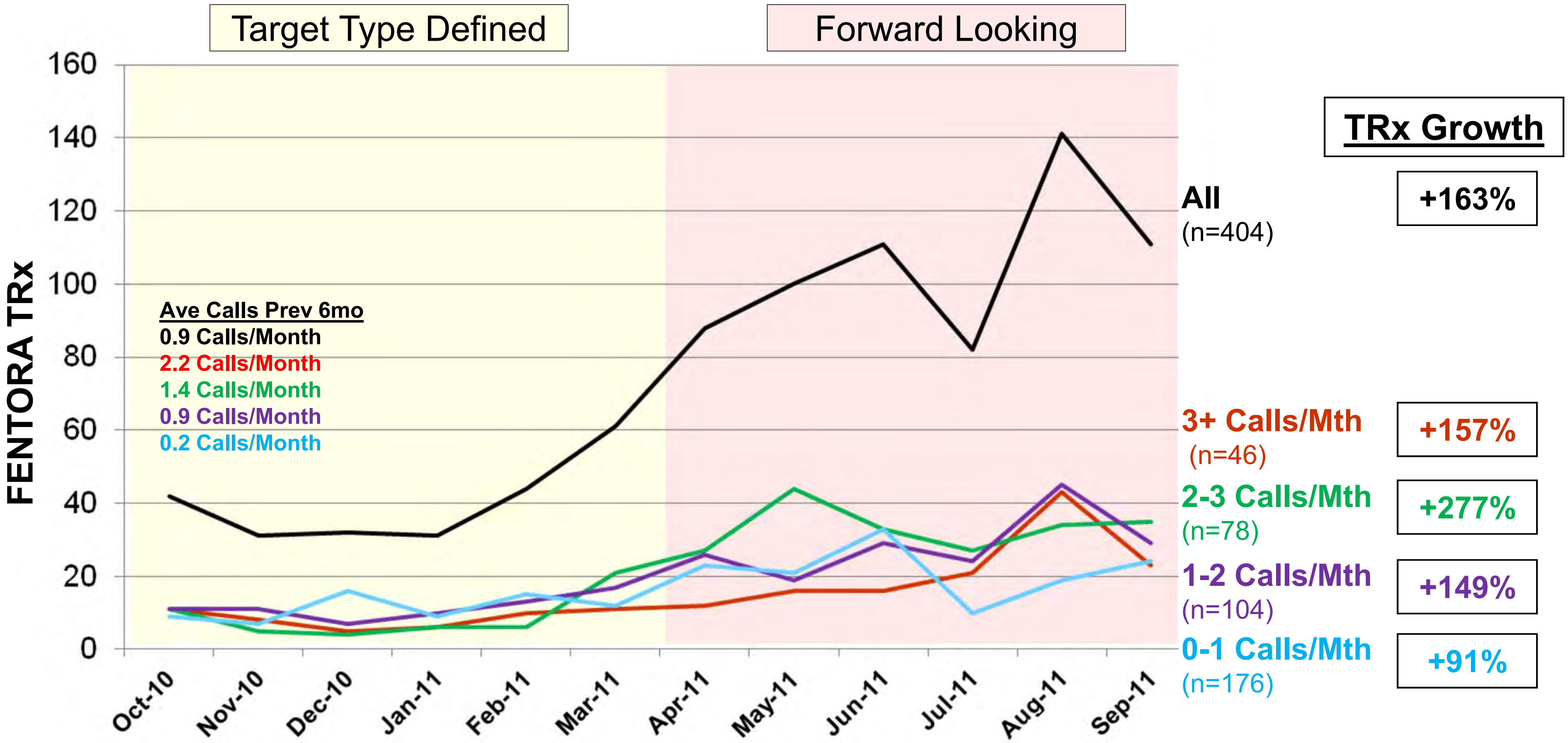
FENTORA Growth by Call Count - R Targets



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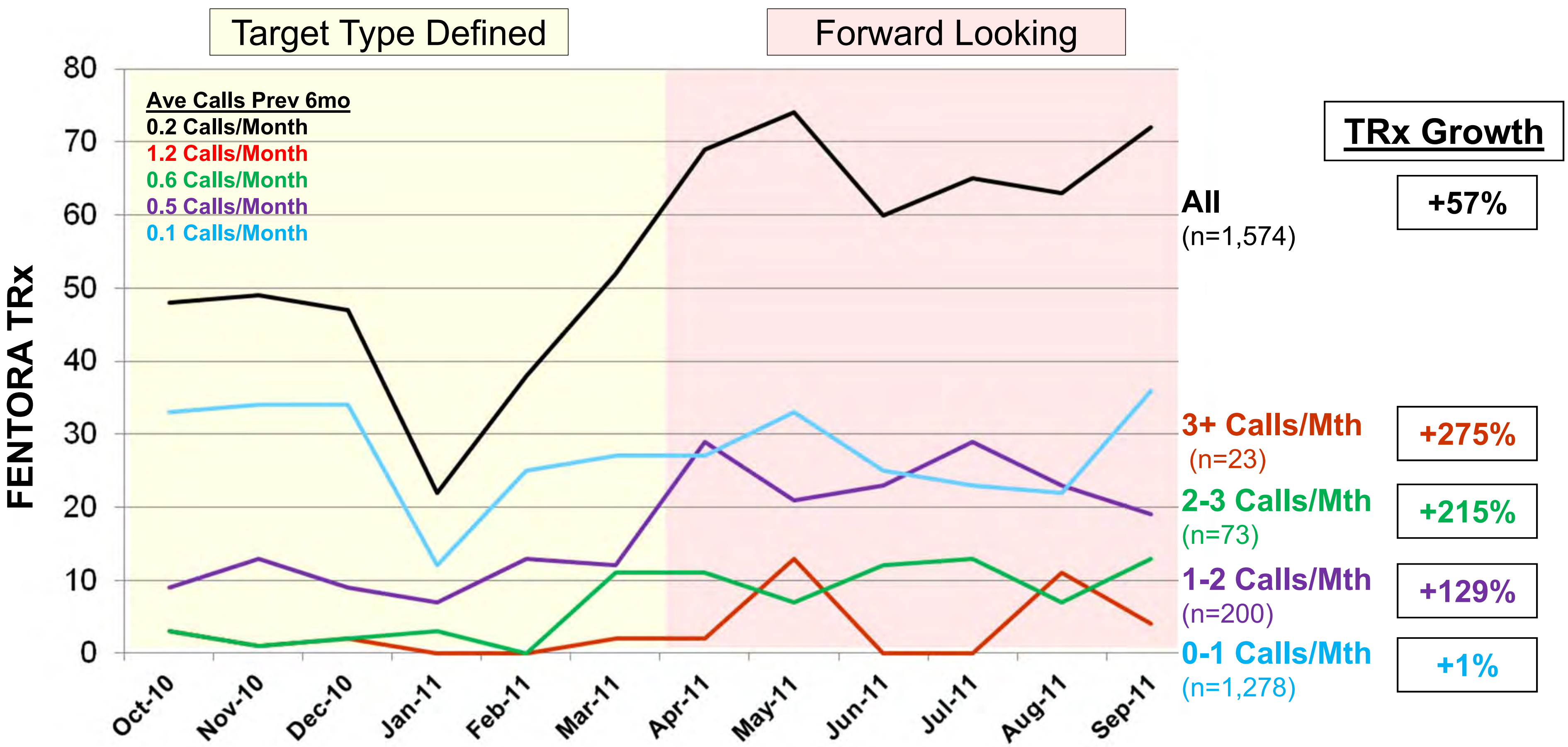
FENTORA Growth by Call Count - O Targets



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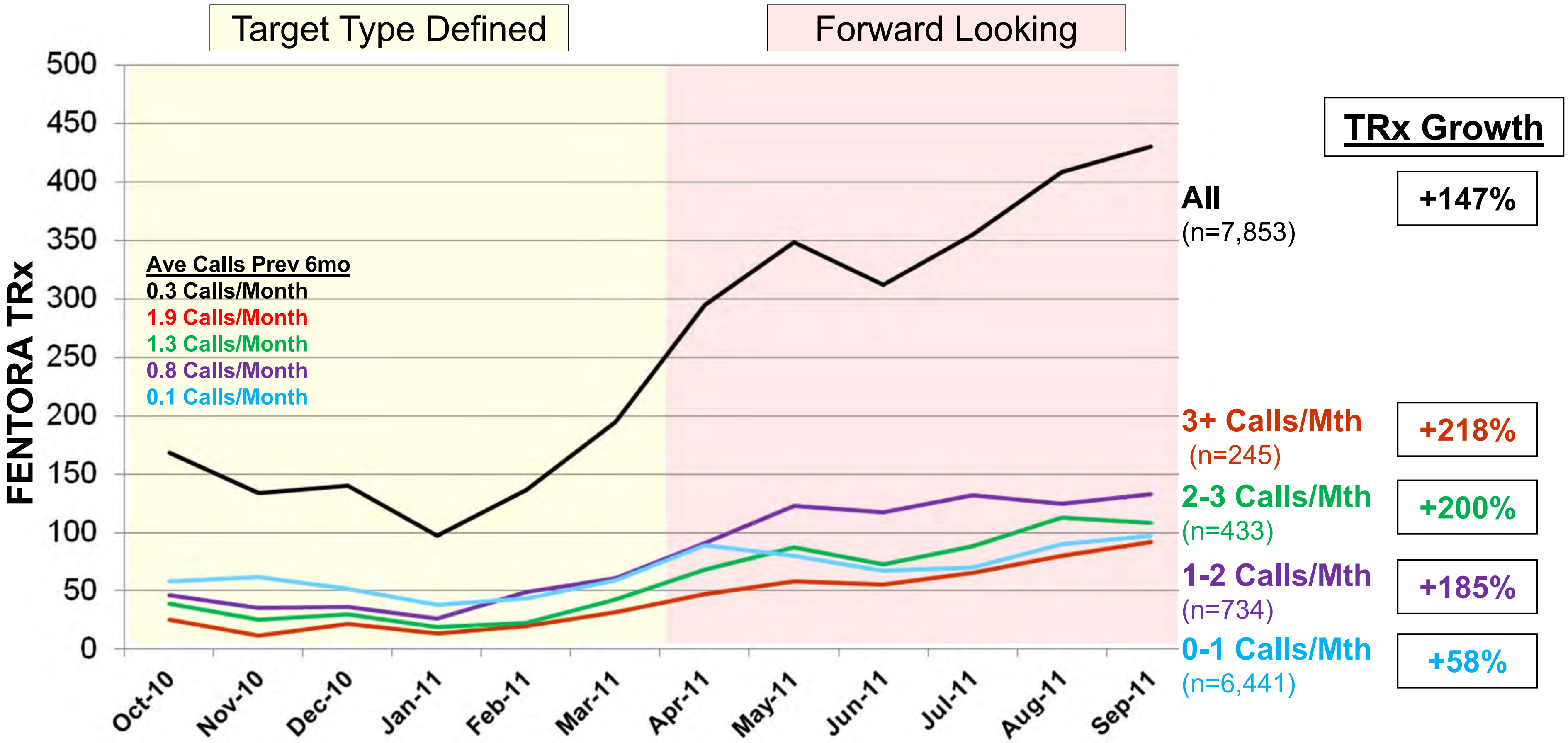
FENTORA Growth by Call Count - H Targets



TRx Growth: Oct 2010 – Mar 2011 vs. Apr 2011 – Sep 2011
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Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

FENTORA TRx Growth by Previous FENTORA Decile

FENTORA Decile Previous 6mo	FENTORA TRx Previous 6mo	FENTORA TRx Current 6mo	FENTORA TRx Growth	% Growth
10	2,788	2,415	-373	-13%
9	2,587	2,384	-203	-8%
8	2,671	2,908	237	9%
7	2,692	2,723	31	1%
6	2,604	2,338	-266	-10%
5	2,586	2,274	-312	-12%
4	2,640	2,304	-336	-13%
3	2,638	2,260	-378	-14%
2	2,609	2,340	-269	-10%
1	2,477	2,449	-28	-1%
Total	26,292	24,395	-1,897	-7%

Previous 6 months: Oct 2010 – Mar 2011; Current 6 months: Apr 2011 –Sep 2011
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

FENTORA TRx Growth by Specialty

Specialty	FENTORA TRx Previous 6mo	FENTORA TRx Current 6mo	FENTORA TRx Growth	% Growth
PMD	17,430	17,698	268	2%
PCP	4,236	4,733	497	12%
ONC	881	1,151	270	31%
N	1,488	1,812	324	22%
A/O	2,257	2,860	603	27%
Total	26,292	28,254	1,962	7%

Specialty Breakdown by Target Type

Specialty	F	R	O	H
PMD	59%	52%	0%	38%
PCP	20%	27%	0%	48%
ONC	5%	3%	100%	0%
N	5%	9%	0%	3%
A/O	11%	9%	0%	11%
Total	100%	100%	100%	100%

Previous 6 months: Oct 2010 – Mar 2011; Current 6 months: Apr 2011 –Sep 2011
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

New* FENTORA Writers

Specialty	HCP Count	FENTORA TRx Current 6mo
PMD	336	1,356
PCP	358	962
ONC	189	473
N	34	105
A/O	195	963
Total	1,112	3,859

Targets Current 6mo	HCP Count	FENTORA TRx Current 6mo
F	197	2,172
R	35	85
O	166	311
H	242	465
Non-Targets	472	826
Total	1,112	3,859

*New FENTORA writers wrote in current 6 months (Apr 2011 –Sep 2011) and not in previous (Oct 2010 – Mar 2011)
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

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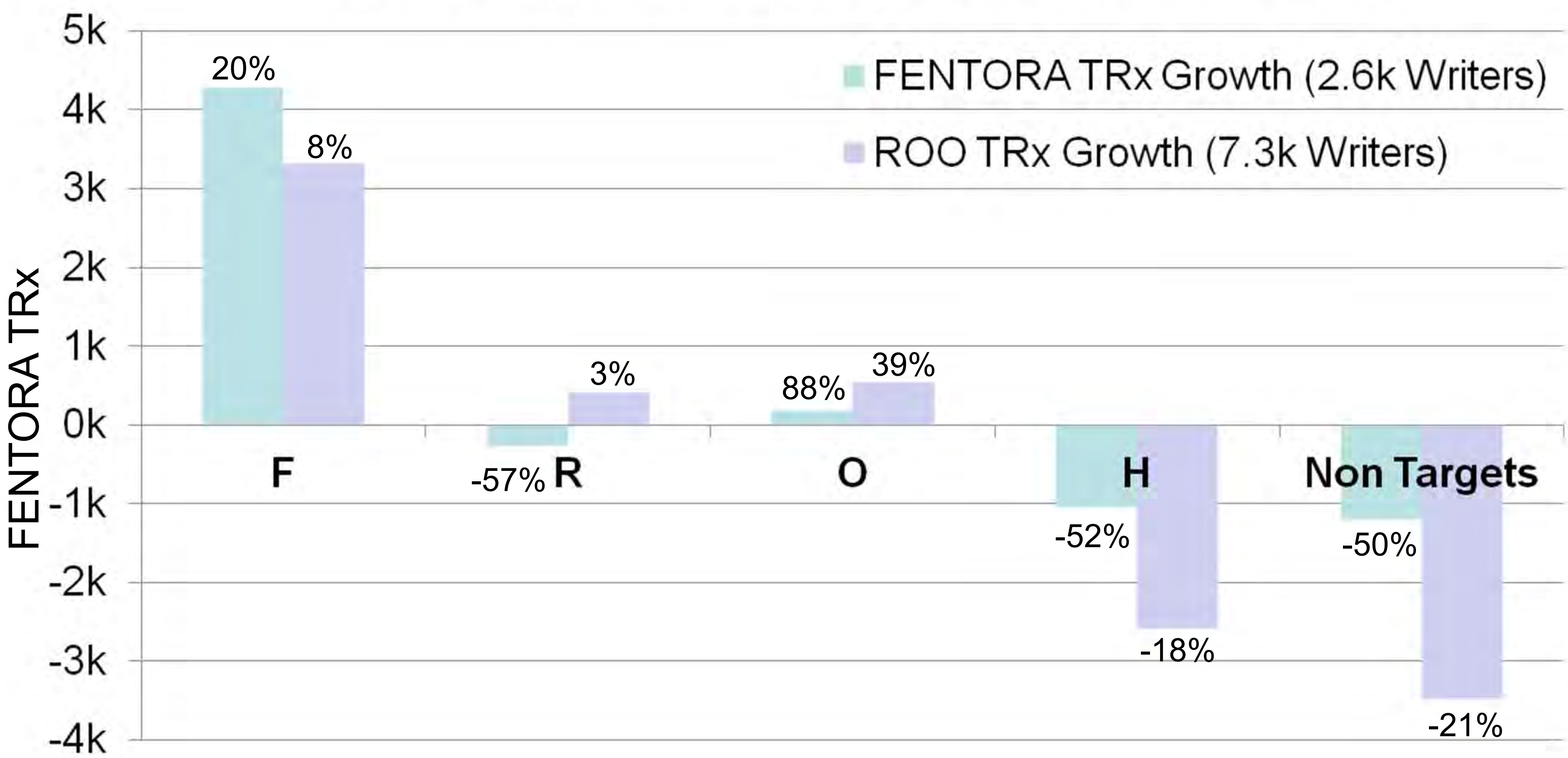
FENTORA and ROO TRx Growth* by Target Type**



*6 vs. 6 month growth: Oct 2010 – Mar 2011 vs. Apr 2011 –Sep 2011
**Targets defined based on current time period: Apr 2011 –Sep 2011
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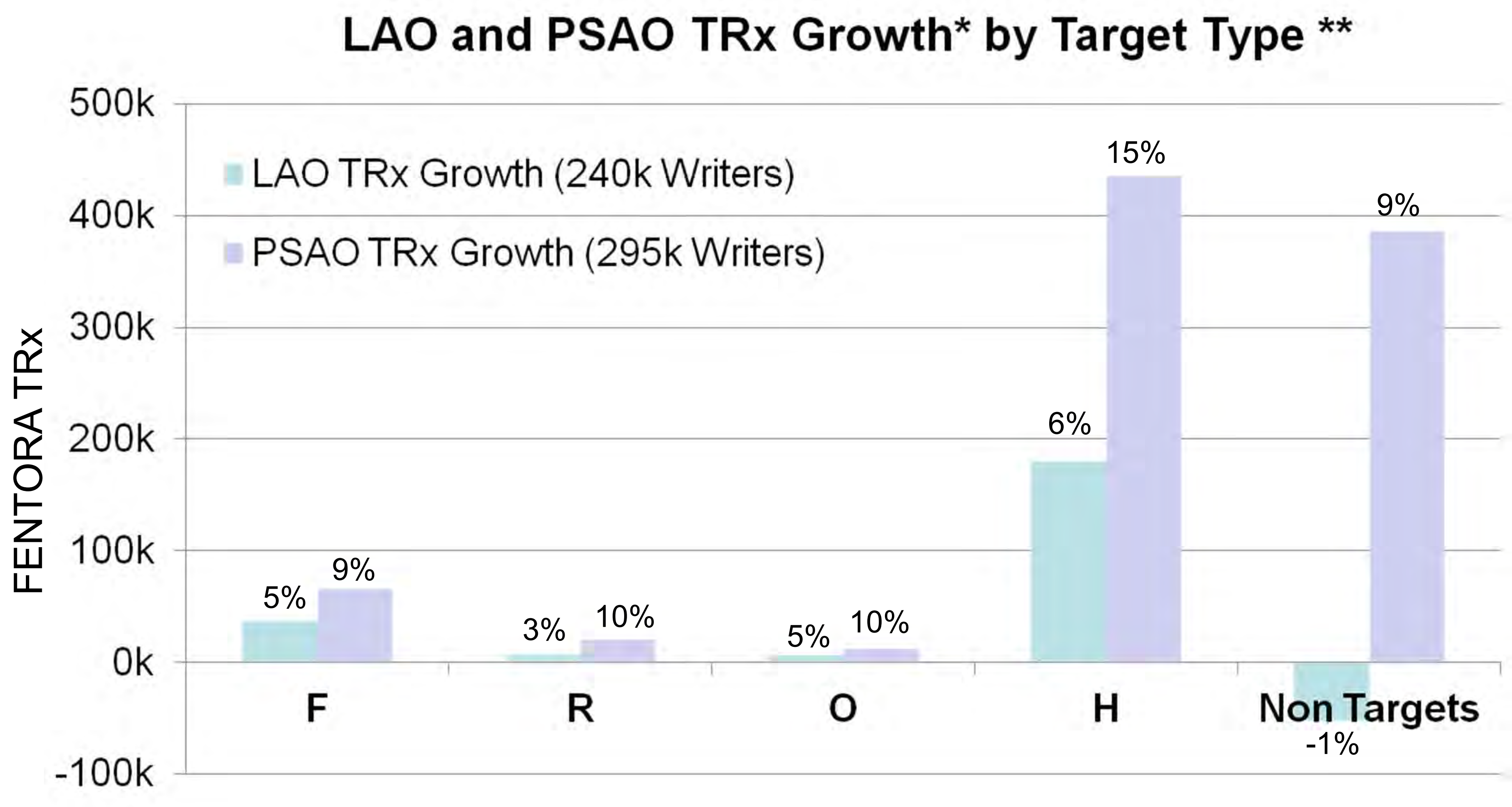

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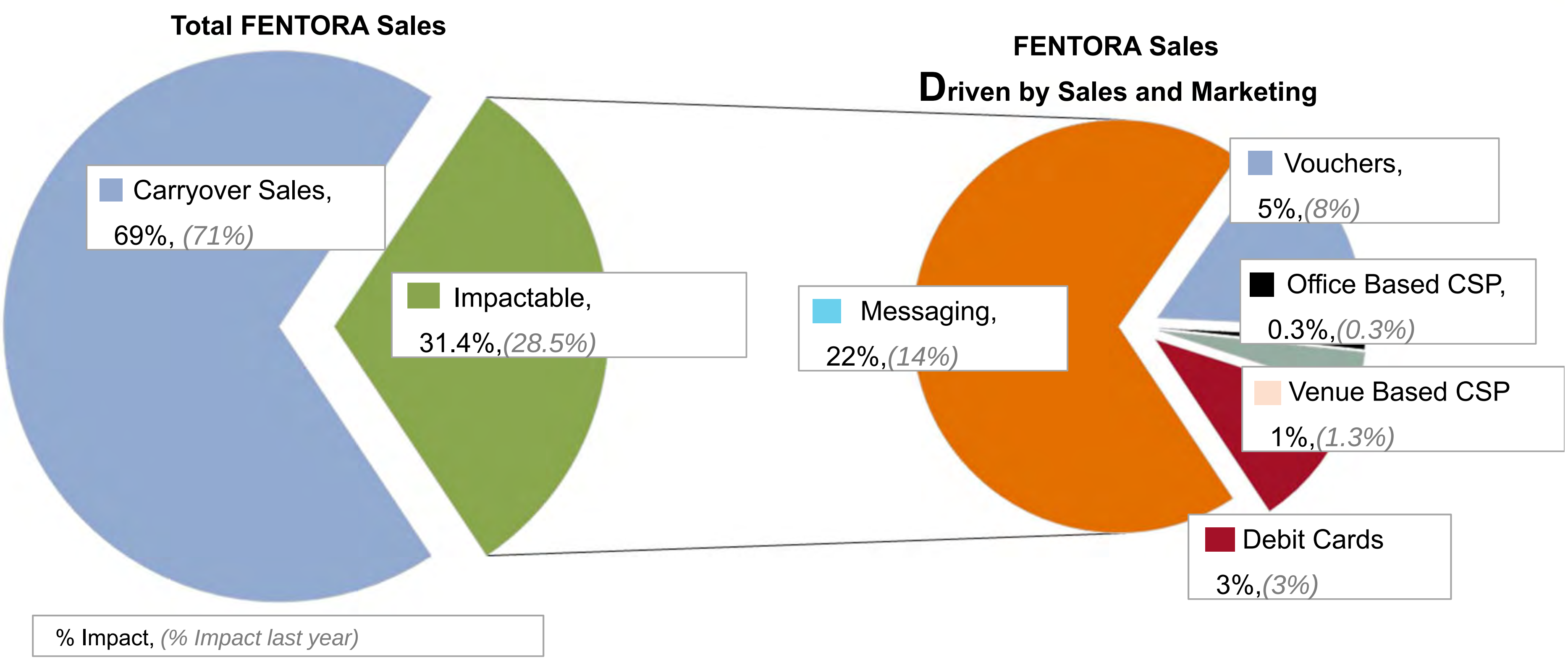
**Targets defind based on current time period: Apr 2011 –Sep 2011
Analysis excludes FENTORA DNC and Legislative Restricted HCPs
Source: Wolters Kluwer September 2011 Rx Data

Financial Summary

- Growth from F targets (~4.3k TRx) is outweighing the decline from H and non-targets (~-2.3k)
- Potential to grow ROO Writers for FENTORA
- PSAO and LAO TRx is growing among all target groups

Promotion Explains 31.4% of *FENTORA* Sales



	Rep Message	Vouchers	Debit Cards	Venue Based CSPs	Office Based CSPs	Carryover
% of Revenue	22%	5%	3%	1%	0.3%	69%

FENTORA Sales at Historical Promotional Effort (Annualized Mar 2011 – May 2011)

For the Most Part, Tactics are Highly Profitable

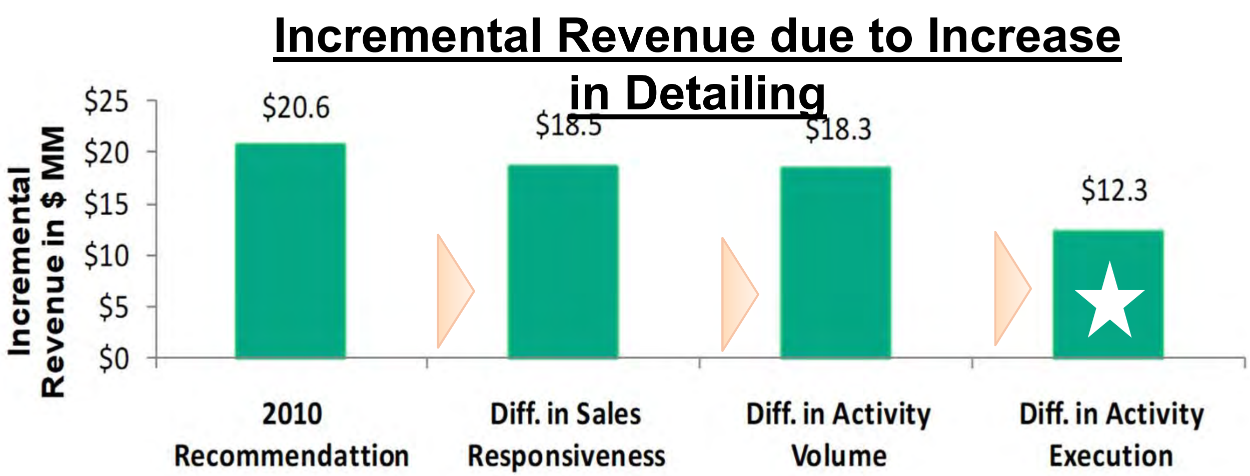
Tactic	Short-Term Marginal ROI*	Total ROI*
Sales Call	67%	**262%**
Rep Message	58%	263%
Vouchers	73%	254%
Debit Cards	Physician-level data unavailable	267%
CSPs – Venue	5%	5%
CSPs – Office	-51%	-51%

35% of "mapped" attendees are outside 17K target universe**

Sales calls are the total of Messages, vouchers & debit cards
*mROI is the incremental profit at a given activity level over the Mar'-May'11 time period; Rep message cost assumes PDE cost of $121
mROI of Rep Message includes 2 years of carryover impact. For the rest of the tactics, no future carryover impact is included in the profitability calculation
*Total ROI = (Impactable Sales*Gross-to-Net Margin)/Cost -1
Sales Impact and Cost are based on annualized 3 months activity covering the Mar-May'11.
Debit card costs include GTN costs, while voucher costs exclude GTN costs for ROI calculation purposes
**FENTORA 1-10, ROO 1-10, LAO/PSAO 5-10, Onc

2011 Incremental Revenue from Detailing

- Projected volume of activity (PDEs) is tracking well against recommended levels
- Short-fall on potential incremental revenue is due, primary, to differences at the prescriber segment (decile) level compared to the recommendation



SF Effort Scenario	Activity
2010 Historical	28.1k PDEs
2010 Study Recommendation	103.7k PDEs
2011 Actual (Mar'11-May'11 Annualized)	100.6k+ PDEs

2011 Detailing Reach and Frequency

	2010 Recommended PDE Effort		Current Effort* (annualized Mar – May'11)	
ROO Decile	% MD Reach	PDE Freq.	% MD Reach	PDE Freq.
H (10-8)	98%	30	89%	33
M (7-5)	98%	27	80%	27
L (4-1)	71%	14	34%	19

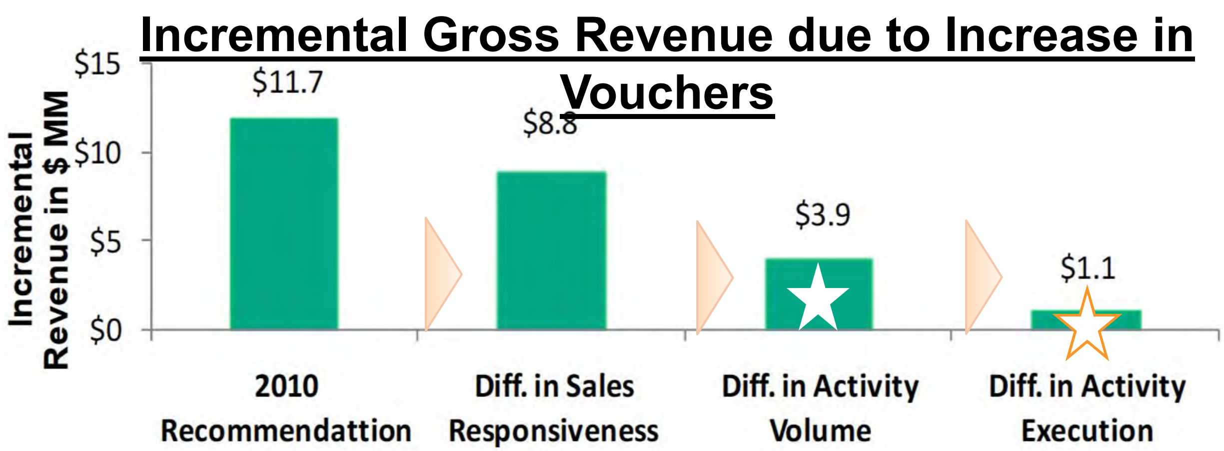
Frequency is tracking on, or above, recommended levels

Reach well below recommended levels In lower deciles

* Does not include calls outside ROO deciles

2011 Incremental Revenue from Vouchers

- While the volume of voucher redemptions is substantially higher in 2011 compared to 2010, we have achieved only a fraction of the recommended increase
- Further short-falls on potential incremental revenue are the result of differences at the prescriber segment level compared to the recommendation



Voucher Scenario	Redemptions
2010 Historical	6.3k
2010 Mktg. Mix Recommendation	16.6k
2011 Actual (Mar'11-May'11 Annualized)	9.9k

2011 Voucher Reach and Frequency

- Most of the increased activity (voucher redemptions) came from the same set of prescribers redeeming more vouchers

	2010 Recommended Voucher Utilization		Current Utilization (annualized Mar – May'11)	
ROO Decile	% MD Reach	Voucher Freq.	% MD Reach	Voucher Freq.
H (10-8)	80%	27	45%	44
M (7-5)	60%	17	19%	18
L (4-1)	14%	3	3%	10

Negative ROI
In high deciles –
cannibalizing
scripts

Reach well below
Recommended
levels

2011 Debit Card Utilization

- Overall, debit card usage (~4k) lags the number of voucher redemptions (~10k) on an annual basis – renewed focus on the program / linkage may improve use

- We are now receiving debit card data at the **prescriber level** which, going forward, will allow us to improve:
  - ✓ Overall impact assessment
  - ✓ Our coverage strategy
  - ✓ Tracking of program execution

Customer Perceptions

- Need insights slides from Wendy & Michele
- Insert mkt research slides with Fentora negatives from HCPs
  - Why Rxing? Why not?
  - Look at *3928 Final report*

REMS will be a major factor in 2011

- Insert REMS slide that outlines what has to happen in March
- Ask Jessica for slide with different phases of the REMS program

Fentora Sales Force

- Contact Sales Ops – Jennifer for info
- Insert Sales Force
  - Size
  - Structure
  - # of calls by target

Payer Situation

- Insert Payer situation slide

Issues and Opportunities

FENTORA SWOT Analysis

Strengths	Weaknesses

• Efficacy: provides early and sustained relief of BTCP
• Onset: pain relief within 15 minutes in some patients
• Duration: pain relief sustained through 60 minutes
• Body of evidence
• 45k Patients & 290k Rx
• Profile is conducive to effectively treat BTCP
• Unique delivery system may optimize delivery of fentanyl across the buccal mucosa
• Currently only product promoted by PCS
	• Non clinical barriers to prescribing
	    • Cost
	    • Reimbursement
	    • REMS
	• Existing product/class reputation
	• Internal perception and lack of consistent focus
	•

Opportunities	Threats
• Reinvigorate brand and raise awareness of *FENTORA* with "matching" focused campaign launched in 2011 • Empower appropriate patients by educating them about BTCP and encourage dialogue with their HCP about treatment options • Increased competition may raise awareness & treatment of BTCP with ROO • Development of appropriate BTCP / ROO recommendations / guidelines	• Generic OTFC ROO share ~62% • Non ROO alternatives highly generic (SAOs) and currently do not have REMS (LAOs / SAOs) • New competitors: Onsolis, Abstral, PecFent, Lazanda • MCO pressures / step therapy • Patent and exclusivity challenges • Inability to establish breakthrough SOV in marketplace • Concentrated prescriber base

Cool looking hurdles slide

- Insert TIRF announcement
- REMS
- Increased Competition
- Sales Force Size (decrease of 30)

FENTORA Key Issues

FENTORA is not viewed as the treatment of choice for BTCP

Non clinical barriers hinder patient starts and retention (REMS, Complicated Dosing, Affordability)

Lack of clarity about where Fentora fits within pain management

Category shifting to TIRF may cause confusion

Small base of prescribing physicians

Brand Strategy

FENTORA Indication

FENTORA is indicated only for the management of breakthrough pain in adult patients with cancer who are <u>already receiving and who are tolerant to around-the-clock opioid therapy for their underlying persistent cancer pain</u>

FENTORA®
fentanyl buccal tablet CII
Relief beyond the flare

Vision Statement

Establish *FENTORA* as the first choice ROO for cancer patients suffering with BTP

FENTORA®
fentanyl buccal tablet CII
Relief beyond the flare

Positioning Statement

For HCPs **that** are comfortable with their treatment of BTCP, *FENTORA* **is** the proven product of choice **that** enables HCPs to advance their approach providing freedom from BTCP

FENTORA®
fentanyl buccal tablet CII

Relief beyond the flare

Fentora Strategic Map

TODAY

TOMORROW

Effective yet underutilized brand

First choice in BTCP for widespread number of physicians

Key Issues

FENTORA is not viewed as the treatment of choice for BTCP	Non clinical barriers hinder patient starts and retention (REMS, Complicated Dosing, Affordability)	Lack of clarity about where Fentora fits within pain management	Category shifting to TIRF may cause confusion	Small base of prescribing physicians
Highlight compelling data and unique Mechanism of delivery as reason to believe Fentora is ideal BTCP choice	**Target Office Managers/Nurses to champion Fentora and overcome obstacles**	**Highlight patient triggers for HCPs to recognize when to initiate Fentora therapy**	**Utilize first mover advantage to differentiate with new language**	**Solidify prescribing base while also expanding prescribing universe**

Strategies

Update Based on POA Deck

FENTORA Message Platform

- **Breakthrough pain in patients with cancer is a legitimate medical condition that requires specific pain management**
- ***FENTORA* generally matches the onset, intensity, and duration of a breakthrough pain flare in appropriate opioid-tolerant patients with cancer**
  - Provides relief as early as 15 minutes
  - 75% of episodes significantly relieved by 33% at 1 hour versus 48% of placebo-treated episodes
- ***FENTORA* utilizes Oravescent® technology to optimize delivery of fentanyl**
- **Proper patient selection and dosing are essential to help ensure the appropriate use of *FENTORA***

Programs/Tactical Plan

Tactical Plan

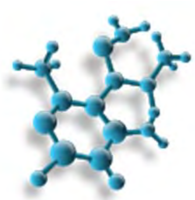
- HCP Promotion
- REMS
- Med Ed/Speaker Programs
- Publications
- Public Relations
- Market Research
- Managed Markets

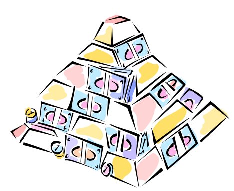
HCP Promotion By Strategy

TODAY — Effective yet underutilized brand

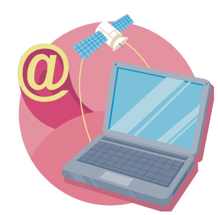
TOMORROW — First choice in BTCP for widespread number of physicians

Key Issues	*FENTORA* is not viewed as the treatment of choice for BTCP	Non clinical barriers hinder patient starts and retention (REMS, Complicated Dosing, Affordability)	Lack of clarity about where Fentora fits within pain management	Category shifting to TIRF may cause confusion	Small base of prescribing physicians
Strategies	**Highlight compelling data and unique Mechanism of delivery as reason to believe Fentora is ideal BTCP choice**	**Target Office Managers/Nurses to champion Fentora and overcome obstacles**	**Highlight patient triggers for HCPs to recognize when to initiate Fentora therapy**	**Utilize first mover advantage to differentiate with new language**	**Solidify prescribing base while also expanding prescribing universe**
Programs	Highlight Differentiation	Nurse & Office Mgr program	HCP-PT Dialogue Program	Updated Messaging	Robust CRM/NPP Program





OWN TIRF



Insert Tactics By Medium

- HCP Promotion
- REMS
- Med Ed/Speaker Programs
- Publications
- Public Relations
- Market Research
- Managed Markets

2012 *FENTORA* Budget & OPEX

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Relief beyond the flare

Cephalon
INSIGHTS INTO MEDICINE™

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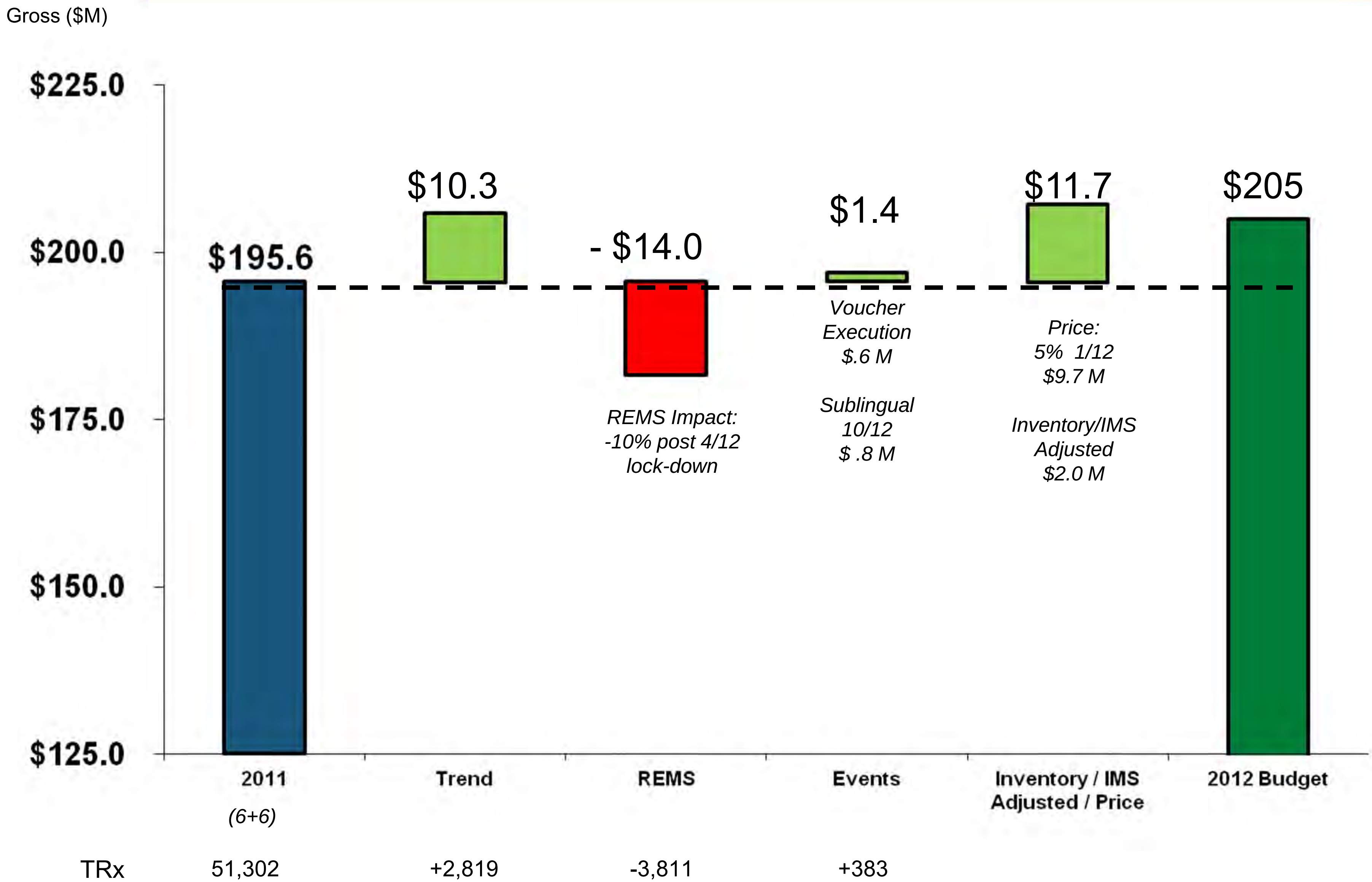
Insert Promotion sensitivity slide

FENTORA 2012 Budget – Gross Revenue



FENTORA 2012 Budget Assumptions

	LRP (3/11) 2012	Budget Plan (9/11) 2012
Market	• TRx Growth 13.2%	• TRx Growth - 6.5%
Competition	• Competitive uptake to drive growth PecFent launch 6/11, 12.5% share Abstral launch 3/11, 12.2% share Onsolis 5/11 REMS, 9.2% share • Minimal competitive impact on FENTORA share • Class REMS in 2011	• Limited competitive uptake in ‘11 • Competitive uptake helped by Class REMS (targeted 2H ’12) Lazanda, 4% share Abstral 3% share Onsolis 2% share
Brand	• REMs Impact 10%, April 2011 • Average Share 33% (2012) • PCS 70% weighting, (~77 FTEs) • Target Audience ~ ROO prescribers ~6K • Price Increase 3%	• REMS Impact (10%), April – June 2012 • Average Share 34% • PCS 100% FENTORA (~ 104K PDEs) • Target Audience: ~5.5k (FENTORA D10-2, ROO D5-10 Hi/Hi D10-5, additional oncologists hi/hi D4-10) • Price Increase 5%, 1/12

To be updated….

2012 *FENTORA* Brand Objectives

The 2012 brand objective for *FENTORA* is to achieve:

- Gross sales of $205MM
- Net sales of $127MM
- 34% average market share

In order to achieve this objective, we must achieve the following:

- 50,700 TRx's
- XX% Market share by XX
- % Targeted HCP Awareness level by
- % Untargeted HCP Awareness level by

2011 Plan vs. 6+6

2011 Plan	2011 YTD – August	% to YTD 2011 Plan
TRx (54.4k)	35,640	95%
Share (33%)	%	%
Gross Sales ($205MM)	$126.8MM	96%
Net Sales ($MM)	$108,396,118	%

2011 6+6	2011 YTD – August	% to YTD 2011 6+6
TRx (51.1k)	35,640	%
Share	%	%
Gross Sales ($195.6MM)	$126.8MM	%
Net Sales ($MM)	$108,396,118	%

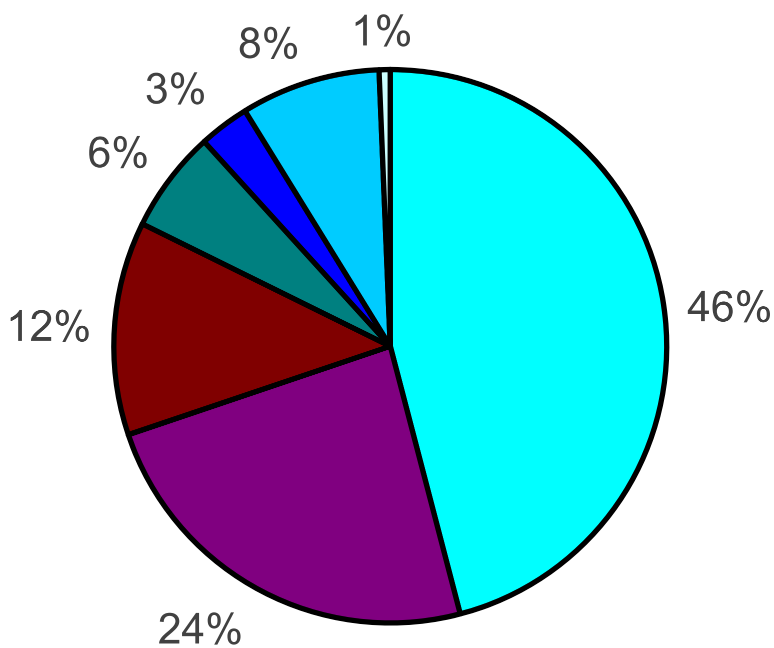
FENTORA 2012 Marketing Budget

Category ($K)	2011 Budget	2011 6+6	2012	Chg vs Budget
Promotional Materials (7630)	7,514	3,718	3,288	(4,226)
Voucher / Debit Cards (7690)[1]	3,909	2,326	2,350	(1,559)
Speaker Programs – CSPs (7600)	2,040	2,253	1,300	(740)
Market Research (7610)	975	592	600	(375)
Conventions (7054)	481	481	481	0
Medical Education (7640)	1,335	953	2,181	846
Journal Reprints (7670)	106	0	0	(106)
Corporate Memberships ((7056)	5	20	20	15
Charitable Contributions (7070)	5	5	0	(5)
Consultants (7225)	5	5	0	(5)
Total Promotion	**16,375**	**10,353**	**10,220**	**(6,155)**
Public Relations	630	388	630	0
REMS (marketing only)	2,601	2,247	500	(2,101)
Total *FENTORA* Marketing (before G-N)	19,606	12,988	11,350	(8,256)
Voucher / Debit Card Gross to Net	5,000	9,327	9,400	4,400
Total *FENTORA* Marketing	24,606[3]	22,315	20,750	(3,856)

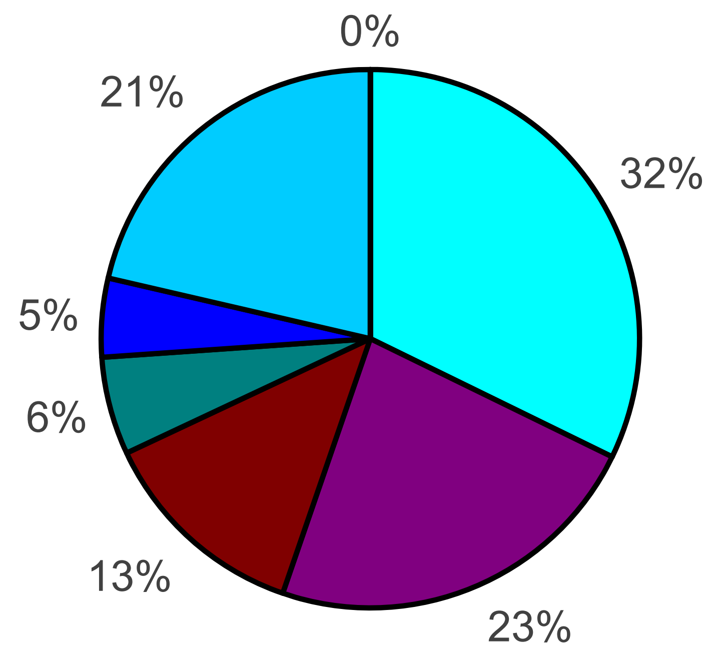
[1] 2011: $2,400 vouchers, $1,309 debit cards, $200K tele-detailing
2011 6+6: $1,538 vouchers, $788 debit cards
2012: $1,550 vouchers, $800 debit cards

FENTORA 2011 Plan A&P vs. 2012 Budget

2011 A&P



2012 A&P



- Promo Materials (7630)
- Speaker Programs -CSPs (7600)
- Conventions (7054)
- Journal Reprints (7670)
- Voucher/debit Cards (7690)
- Market Research (7610)
- Promo Med Ed (7640)

2012 Marketing A&P of $10.2MM, down 37.6% from 2011 plan

Assumes how many reps?

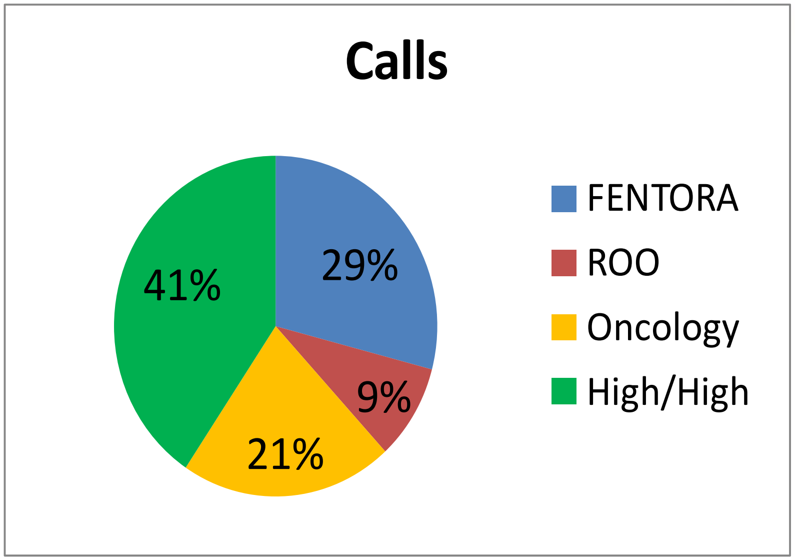
FENTORA 2012 Call Plan with Optimized Alignment

~104k FENTORA Calls
~5,200 Physicians[1]

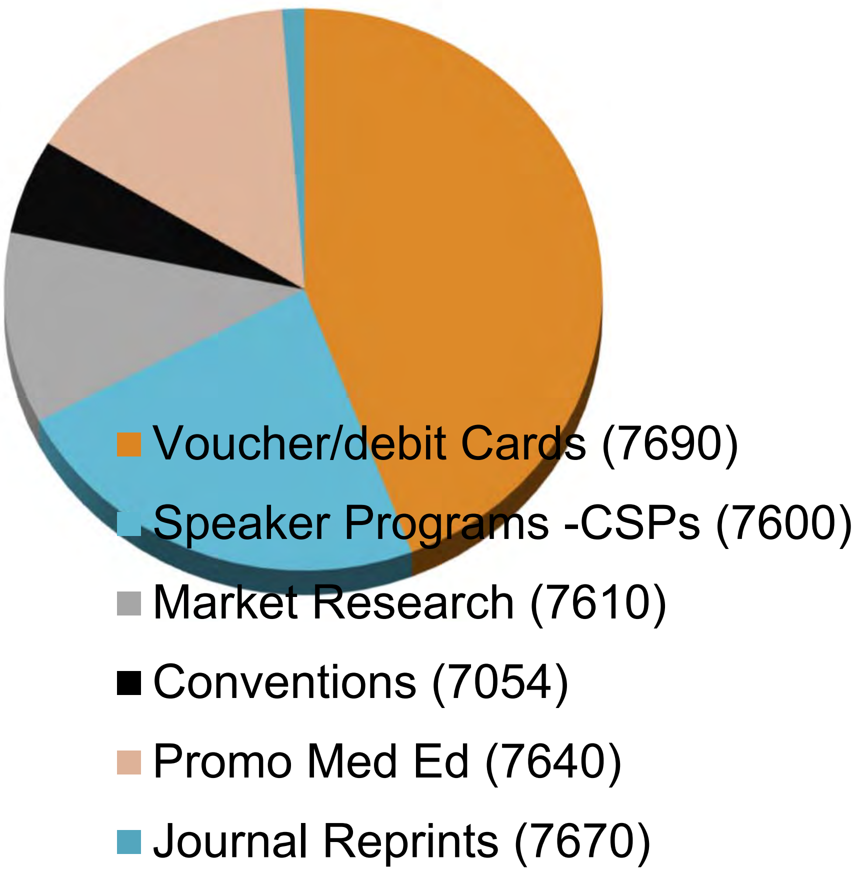
Target Group	FENTORA Decile 2-10	Additional ROO Decile 5-10	Additional High/High LAO/PSAO Oncologists	Additional High/High LAO/PSAO
Physician Count	1,253	390	1,526	7,771
Planned Reach	100%	100%	80%	30%
Planned Monthly Frequency	2	2	1.5	1.5
Total Annual Calls	30,072	9,360	21,975	41,964

[1]Based on planned reach

Additional High/High LAO/PSAO Oncologists = Decile 4-10 for both LAO and PSAO
Additional High/High LAO/PSAO = Decile 5-10 for both LAO and PSAO



- Coverage 94% prescribers, 95% TRx
- 59% of promotional effort applied toward
  - FENTORA business
  - ROO business to support REMS Launch
  - Highest potential oncologists
- 41% of promotional effort focused on non FENTORA prescribers with highest potential


Voucher/debit Cards (7690)
Speaker Programs -CSPs (7600)
Market Research (7610)
Conventions (7054)
Promo Med Ed (7640)
Journal Reprints (7670)

FENTORA 2012 Contribution Statement

	2011 Budget	2012 LRP	2012 Budget	Sales & Marketing Activities
Gross Shipments	205,000	227,391	204,992	5% Price Increase assumed Jan. 2012
Net Sales	173,350	188,626	168,913	Co-Pay Program and Vouchers included in G-N deduction
	84.6%	*83.0%*	*82.4%*	
Cost of Goods Sold	6,886	7,581	6,863	
cgs%	*4.0%*	*4.0%*	*4.1%*	
Gross Margin	166,464	181,045	162,050	
Marketing	16,375	18,200	10,220	Personal, Non-Personal and Web initiatives , Voucher / Co-Pay Admin Costs, CSPs, Medical Education, Marketing Research
Reimb	-	-	-	
SAA	-	-	-	
Marketing & Promo.	16,375	18,200	10,220	
Sales Force	19,019	19,399	16,480	71 FTEs
3rd Party Sales Force	-	-		
Expense Subtotal	35,394	37,599	26,700	
Total Marketing Responsibility	131,071	143,446	135,350	
Clinical Trials	2,148	-	1,000	Pediatric Study
Medical Education	2,100	1,200	1,200	
Phase IV	200	-	-	
Publications	544	309	250	
ISS	150	100	25	
Regulatory	1,116	1,227	-	
REMS	2,711	1,300	4,923	Includes Marketing ($500K)
Public Relations	630	500	630	
Expense Subtotal	9,599	4,636	8,028	
Total Expense	44,992	42,235	34,728	
Total Product Contribution	121,472	138,810	127,322	

Back Up

breakthrough thinking. collaboration. customer focus. accountability.

2009 – 2010 KEY EVENTS SUMMARY

	Nov '09	Dec '09	Jan '10	Feb '10	March '10	April '10	May '10
Demand Generation:	• Satellite broadcast rep pull through materials		• Wellpoint Win (20MM Lives) • 113 Speaker Programs Launched	• Evolved HCP Campaign • HCP Segmentation Implemented	• WebMD Consumer Launch • DTC Ad in 5 CBSA's	• Sales Rep DTC/DTP Pull-through	• Revised materials in field minimizing PI promotion to 1 day
Challenges:	• Hepatic Label Update	• Negative media coverage on Hepatic Label Update - Medscape - Arthritis.org	• Writers, Tubes/TRx & Tubes all down from prior month • Healthcare Reform			• DDMAC Untitled Letter	• Promotional Materials Pulled (twice) • DTC/DTP Delayed

breakthrough thinking. collaboration. customer focus. accountability.

2010 UPCOMING KEY EVENTS

Demand Generation:

June '10	July '10	Aug '10	Sep '10	Oct '10	Nov '10	Dec '10
• Re-launch DTC/DTP (Pending DDMAC response timing) • POA II	• Vimovo prep. & messaging	• Pharmacy re-contact program	• Phase II Speaker Programs	• ABG ready to execute when appropriate	• American College of Rheum.	
	← Own the Office Campaign →					
	← Revise appropriate HCP materials →					

Challenges:

June '10	July '10	Aug '10	Sep '10	Oct '10	Nov '10	Dec '10
• Awaiting DDMAC guidance on Patient Brief Summary	• Vimovo Launch • Naproxcinod PDUFA			• Loss of exclusivity 10/17/10		
← Healthcare Reform →						

REMS Update – We're Ready!

July 21, 2011:
Approval &
Press Release

October:
REMS Speaker
Training and CSPs

March 20, 2012:
REMS
Operational

September

Oct – Mar 2012:
Ongoing Personal
& NP Efforts

September 6 – Dear Stakeholder Letters Mailed
September 6-21 – PCS & NAM E-learning/Training
September 7-9 – Ready For REMS at Pain Week
September 13th – Prescriber Field Test
September 19 – PCS Enrollment Materials Shipment
September 19-21 – AM Meeting
September 22&23 – RD led Implementation Telecons
September 26 – Enrollment begins

FENTORA 2012 Objectives & Strategies

For HCPs that are comfortable with their treatment of BTCP, *FENTORA* is the proven product of choice that enables HCPs to advance their approach providing freedom from BTCP

Objectives

Develop a common understanding of BTCP that evolves treatment approach

Reassess patient needs and align with benefits of *FENTORA*

Increase conviction that patient benefits outweigh additional effort needed

Strategies

Educate target segments on identifying and treating BTCP appropriately

Establish broader benefits of FENTORA vs. current BTCP treatment approach

Establish partnership in the process to enhance patient experience

Treating BTCP Appropriately

Objectives

Develop a common understanding of BTCP that evolves treatment approach

Strategies

Educate target segments on identifying and treating BTCP appropriately

Key Tactics & Initiatives

- Pain / Oncology Centers of Excellence (COE) Targeted Engagement
- COE Editorial Steering Committee (Content/Best Practices)
- Efficient Medical Education (leveraging peer interaction)
- Third Party / Advocacy Outreach

Current BTCP Treatment Approach

Objectives

Reassess patient needs and align with benefits of *FENTORA*

Strategies

Establish broader benefits of FENTORA vs. current BTCP treatment approach

Key Tactics & Initiatives	ROI
• Sales Force Engagement / Selling Tools	3:1
• Case Based Approach / Learning	
• Targeted CSPs (venue)[1]	2:1 / 3:1[2]
• Medical Education (web, teleconferences)	
• Patient Resources (HCP intermediary)	
• Pain/Oncology Nurse Initiative	

[1]Reducing spend, modifying business rules, mix & setting to increase effectiveness, efficiencies

[2]ROI in Decile 10-9 / Decile 8-7; Overall ROI is 5%. ROI calculated based on all attendees.

SP 3: Establish Partnership in the Process to Enha Patient Experience

Objectives

Increase conviction that patient benefits outweigh additional effort needed

Strategies

Establish partnership in the process to enhance patient experience

Key Tactics & Initiatives	ROI
• REMS	
• Vouchers	3:1
• Debit Cards	3:1
• Patient Education (HCP intermediary)	
• Reimbursement Resources	

2012 *FENTORA* Budget Plan Summary

- Significant Unmet Need in BTCP; ROOs underutilized
- 2011 Plan => Increased investment: sales force effort, focus on key drivers of marketing mix (vouchers, debit cards, CSPs)
  - *FENTORA* slightly below 2011 performance goals
- 2011 was a year of learnings
  - Level of promotion required to maintain base of business
  - Key business drivers remain profitable
  - Refine in execution required to optimize and realize 2012 plan
- Opportunity to maintain product contribution via increased effectiveness and efficiencies
  - Sales force alignment
  - Focused spend (sales force, vouchers, debit cards)
  - Differential resourcing & improved execution

2010 Key Lessons Learned

Update w/ JAT & MN comments

Industry	Customer	Brand
Economic crisis has negatively impacted the market ▪ Fewer patients visiting physician ▪ Decline in branded new starts and add-ons ▪ Decline in adherence and brand refills Growing competitive intensity ▪ Introductions and approval of other TIRF products (Onsolis, Abstral & Lazanda) ▪ Generic medications dominate market Increasing restrictive regulatory guidelines challenge promotion ▪ Heightened DDMAC vigilance with increased review staff & number of enforcement actions ▪ REMS	HCP brand choice primarily driven by efficacy, onset, habit and ease to Rx ▪ OTFC (60% market) perceived as more affordable to prescribe HCPs are more familiar ▪ *FENTORA* perceived has difficult to prescribe, "good enough" relief is acceptable and other options are available HCPs prescribe cautiously (since Dear Doctor Letter) ▪ 3,550 *FENTORA* writers lost from May 2007 – April 2009 to May 2009 – April 2011 BTCP is low priority condition ▪ Low volume of diagnosed patients ▪ Average annual months of therapy has declined from 12 months to 6 months	Low level of awareness among HCPs, Patients and Caregivers ▪ HCPs: ~20% of MDs prescribing or familiar with *FENTORA* (ATU) ▪ Patients: low awareness, but receptive to message and are very to extremely satisfied when using *FENTORA* *FENTORA* continues to outpace BTCP market amid challenges ▪ ROO market continues to decline, FENTORA beginning to reverse trend

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Performance Back Up

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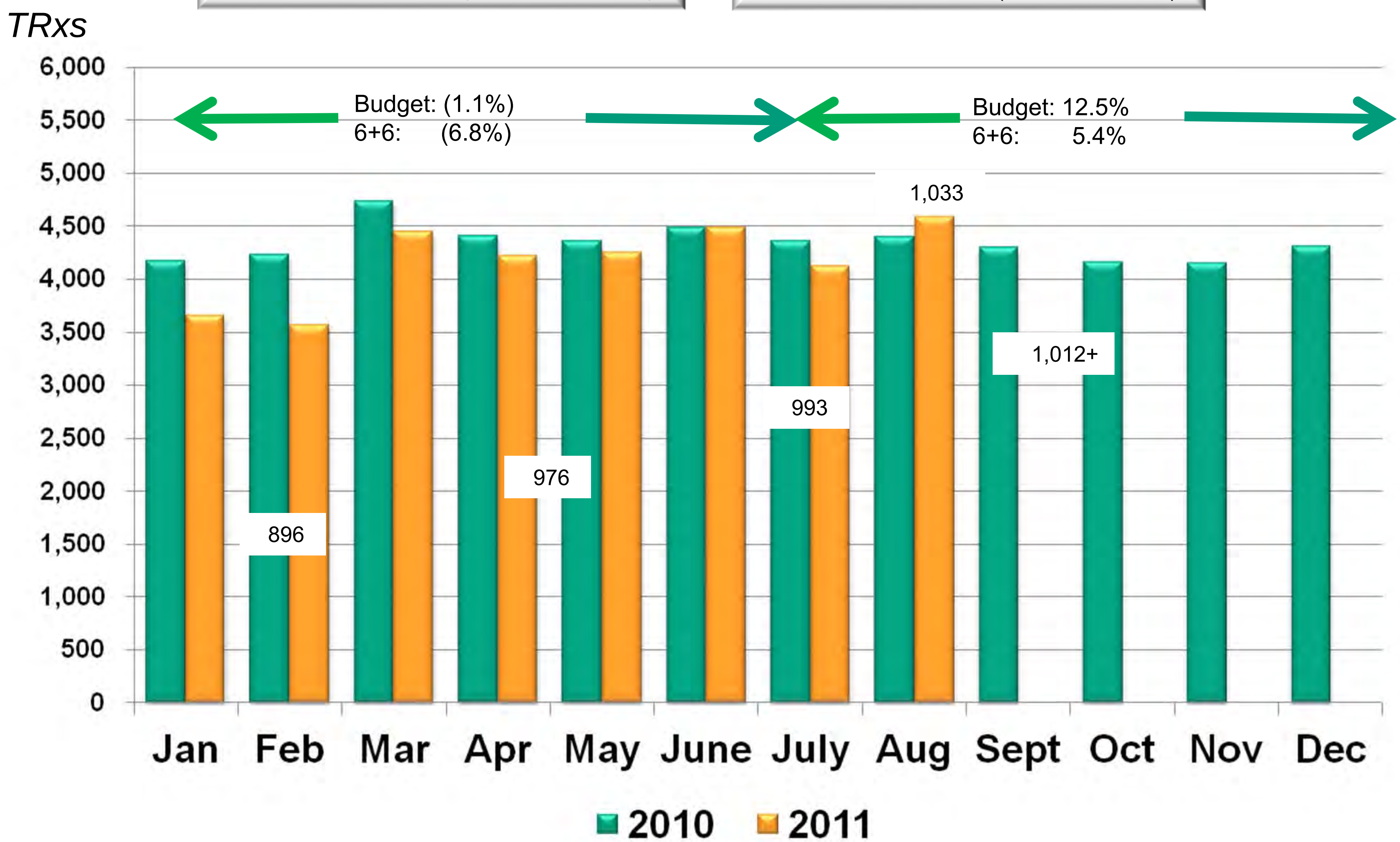
FENTORA Monthly TRxs (Budget) vs. 2010

Budget: $205M
TRx Goal: 54.4K
YTD 2011 TRxs: 33.3 K (95% to YTD Goal)

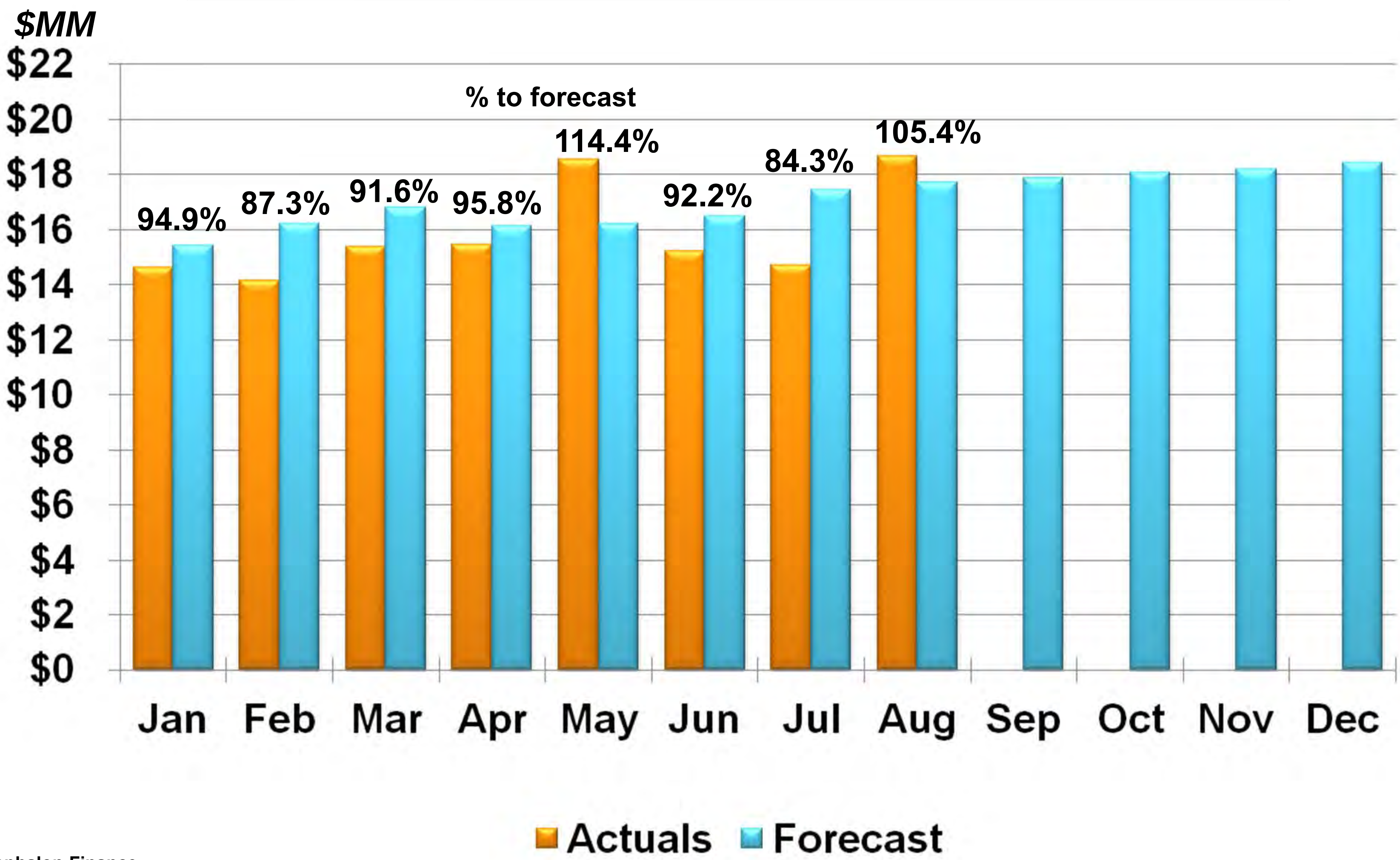
6+6: $195.6
TRx Goal: 51.1K
YTD 2011 TRxs: 33.3 K (100% YTD Goal)



Source: IMS NPA

FENTORA Monthly Shipments vs. Budget

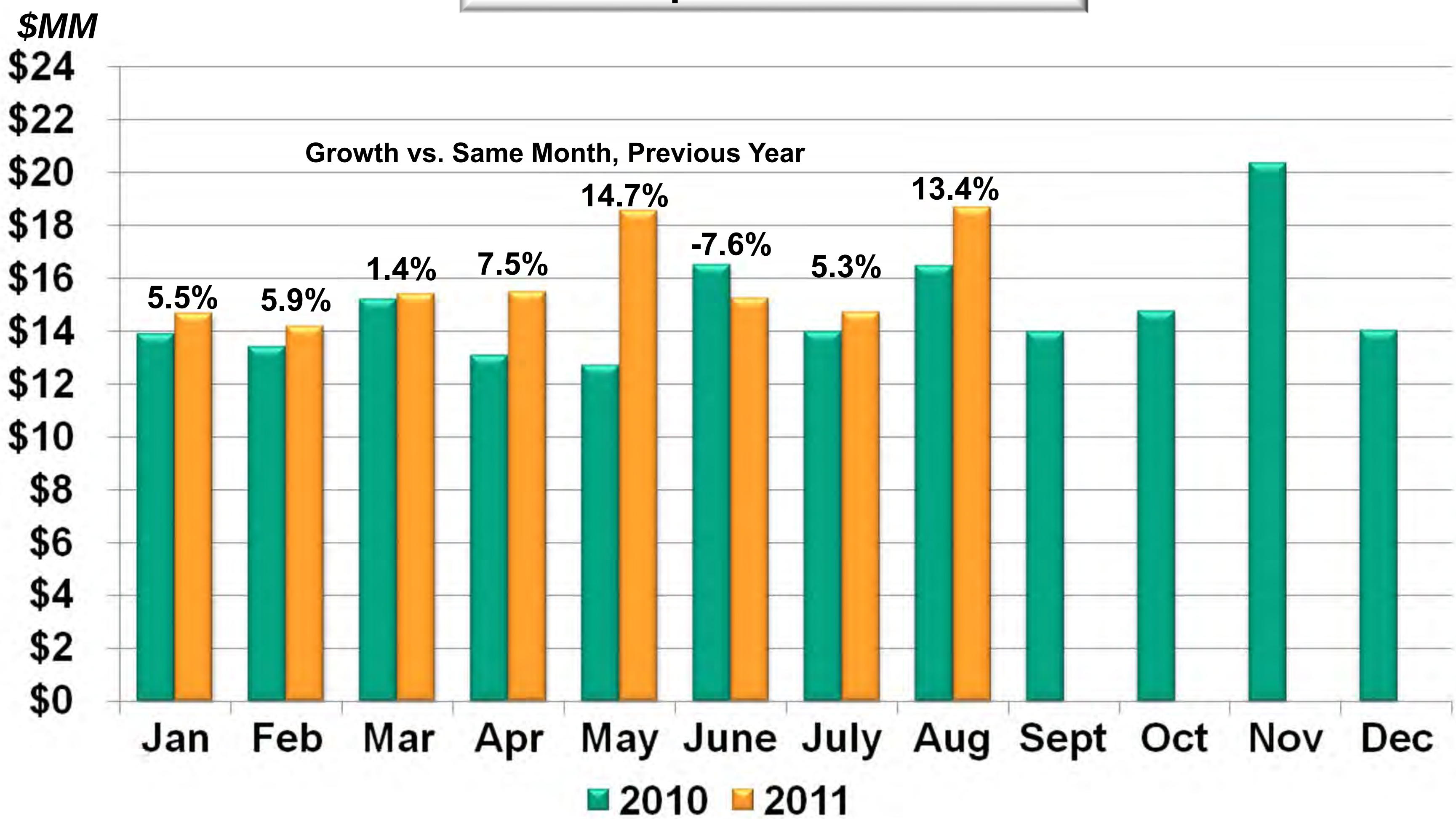
2011 Budget: $205M
YTD 2011 Shipments: $126.8M (96% to YTD goal)



Source: Cephalon Finance

FENTORA Monthly Shipments vs. 2010

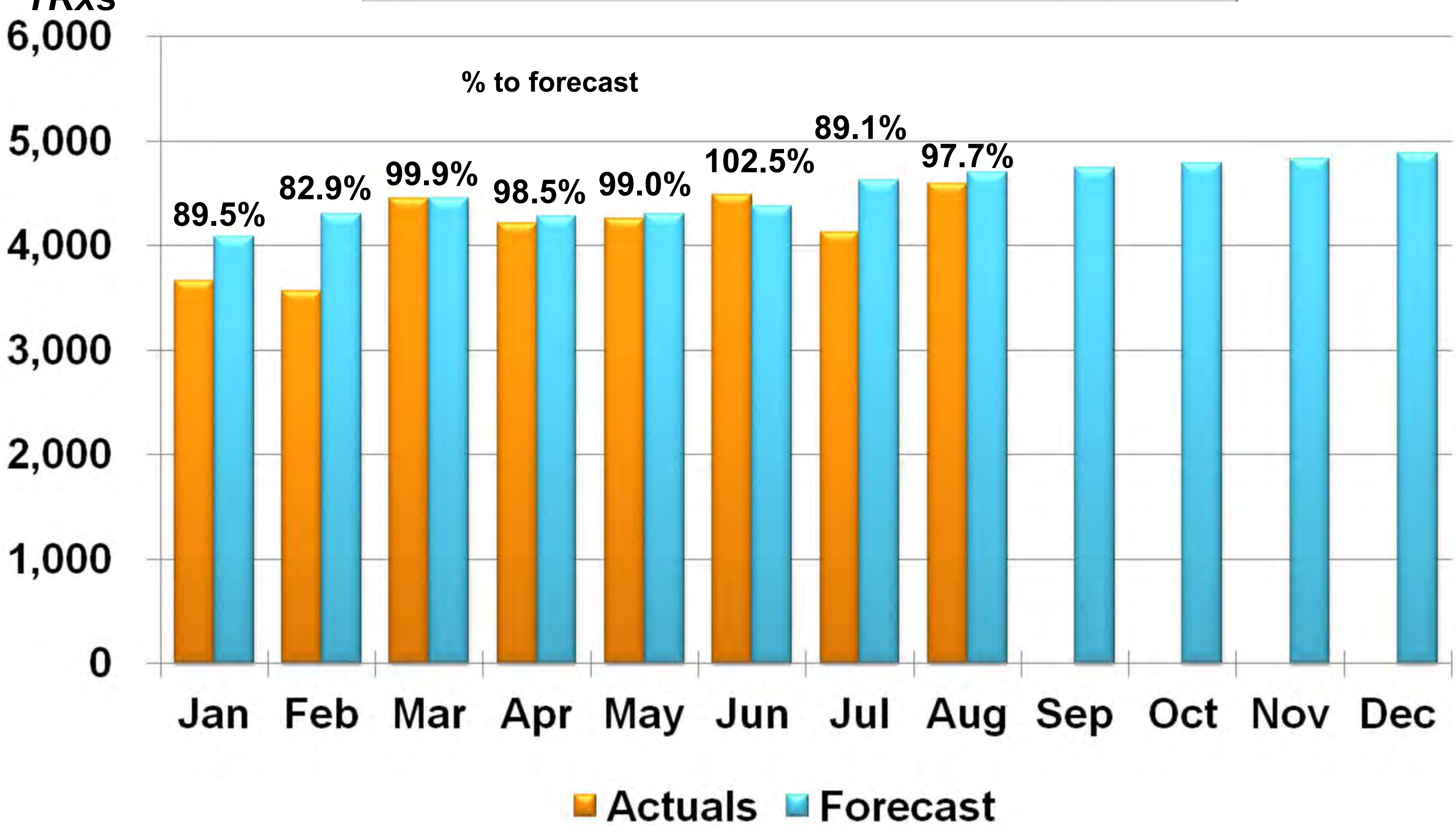
2010 Actual Shipments: $178M
2011 Shipment Goal: $205M



Source: Cephalon Finance

FENTORA Monthly TRxs vs. Budget

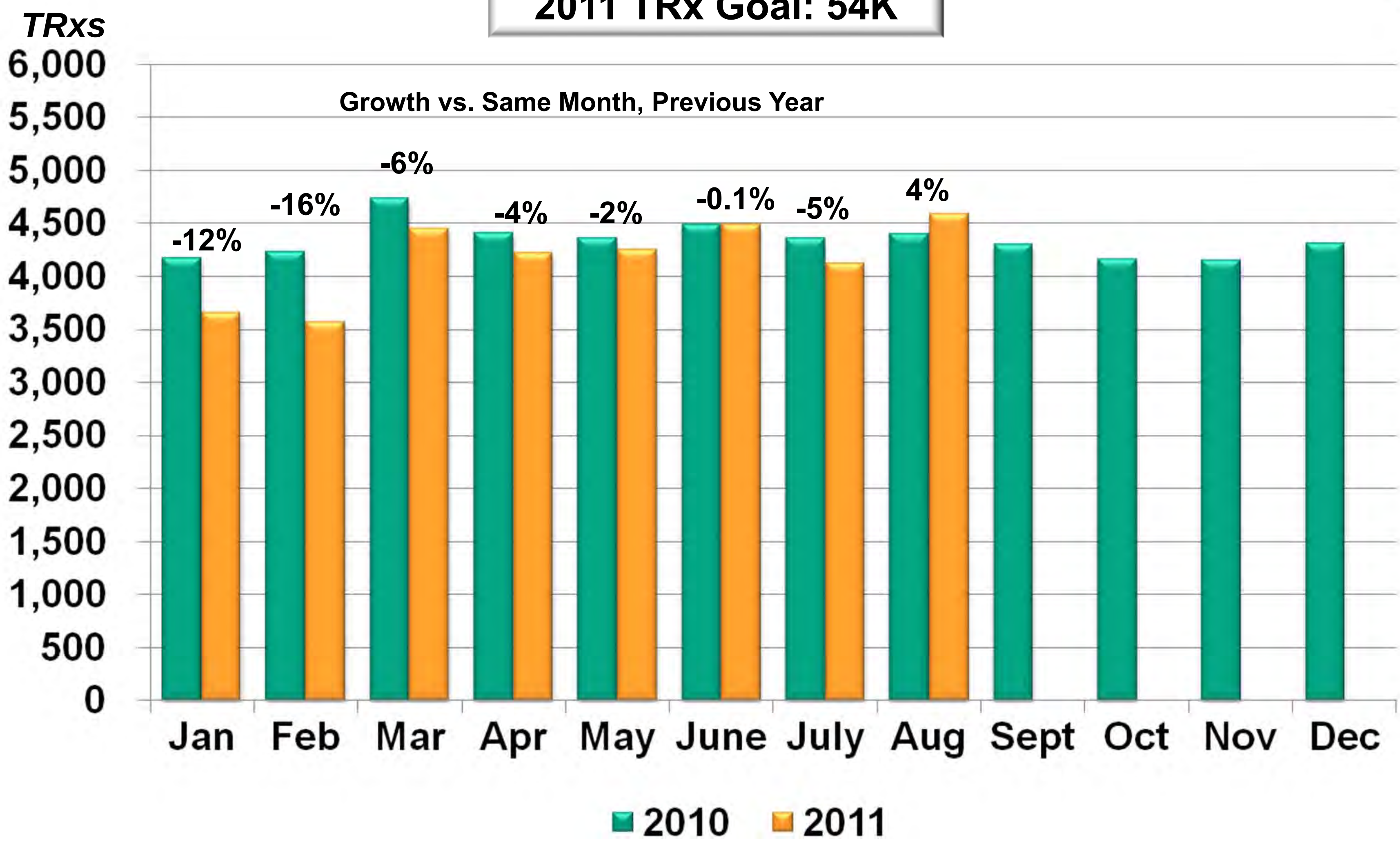
2011 Budget: $205M
2011 TRx Goal: 54K
YTD 2011 TRxs: 33.3 K (95% to YTD Goal)



Source: IMS NPA

FENTORA Monthly TRxs vs. 2010

2010 TRx Actuals: 52K
2011 TRx Goal: 54K



Source: IMS NPA

YTD July Shipments $108.1M, 94% to YTD Budget Forecast
YTD July TRx 28.7k, 95% to YTD Budget

Key Issues Challenges/Opportunities Back Up

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Issue # 1: Challenges & Opportunities

Misconceptions about the characteristics of BTCP and comfort with current treatment approach

Challenges:

Clinically meaningful value of a ROO / *FENTORA* is not seen by HCPs

No current clear guidelines exist for BTCP

Limited commercial discussion around BTCP (Cephalon)

Limited commercial resources to support broad based education

Opportunities:

Expand educational initiatives on BTCP and *FENTORA* to key targeted audiences and COEs

Accelerate *FENTORA* publication plan to disseminate key unpublished data (BOI, head-to-head, expanded label). Align release of data with PR / New Bureau

Improve reach/frequency of sales contacts, support broad reaching efficient education initiatives

Utilize influence mapping to develop and optimize new/enduring content pull through

Issue # 2: Challenges & Opportunities

FENTORA is not viewed as the treatment of choice for BTCP

Challenges:	Opportunities:
Therapeutic Expert ID plan outside PMD is limited	Establish a centralized database of therapeutic experts for *FENTORA*
Continuity of commercial therapeutic experts communications have been sporadic	Establish a communication plan and database for management of therapeutic expert interactions
HCP perception that the clinical benefit of *FENTORA* is not significant enough to make it worth the “risk” of prescribing	Communicate the *FENTORA* value proposition and paint the appropriate patient type in order to move *FENTORA* up in the HCPs current algorithm

Issue # 3: Challenges & Opportunities

Non clinical barriers hinder patient starts and retention

Challenges:

Some HCPs accept recognized sub-optimal treatment "It's not worth it"

Fear of cost, dose escalation, prior auths, time, poor understanding of dosing regimen

Comfort with current treatment option

Fear of addiction

Opportunities:

Optimize voucher / debit card strategy to facilitate convenient dosing, broader adoption

Market Research Back Up

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Summary Metrics – June 2011 ATU

Measure	Wave I 2Q'08	Wave II 4Q'08	Wave III 2Q'09	Wave IV 4Q'09	Wave V 2Q'10	Wave VI 4Q'10
Unaided Awareness of *FENTORA*	20%	30%	29%	26%	44%	13%
Total Awareness of *FENTORA* (unaided + aided)	83%	80%	79%	82%	77%	80%
% Ever Prescribed *FENTORA*	41%	44%	40%	55%	66%	40%
% Prescribed *FENTORA* in Past Month	20%	23%	23%	26%	40%	19%
Intent to Increase Prescribing	23%	19%	27%	20%	24%	16%
Overall Satisfaction (%Top 2 Box)	5.0 (25%)	4.8 (22%)	5.0 (24%)	4.8 (26%)	5.1 (38%)	4.9 (23%)
Likelihood to Recommend (%Top 2 Box)	4.6 (25%)	4.7 (34%)	4.8 (34%)	4.7 (33%)	5.1 (42%)	5.6 (55%)
Efficacy of Pain Relief (#1 in importance)	1st (1,2)	1st (1,2)	1st (1,2)	1st (1,2)	1st (1,2)	2nd (1,3)
Efficacy in Treating Severe Pain (#2 in importance)	1st (1,2)	1st (1,2)	1st (1,2)	1st (1,2)	1st (1,2)	1st (1,2)
Onset of Action (#6 in importance)	1st (1)	1st (1)	1st (1)	1st (1)	1st (1,2)	2nd (1,3)
Patient Out-of-Pocket Affordability (#5 in importance)	4th (last)	4th (last)	3rd (2)	5th (last)	5th (last)	5th (last)

(1) *FENTORA* rated top 2 box; (2) Tied with ACTIQ; (3) Second to ACTIQ

Physician Insights to Positioning Statement

Comfortable	Proven	Product of Choice	Advance Their Approach	Freedom
Experience Knowledge Peace-of-Mind Secure Confident No worries Reliable Efficacy Aware of side effects	Clinical Data Body of Evidence Reason to Believe Thousands of people have tried Effective Confident in data Security Assurance	Standard of care Everyone is prescribing it Easy to prescribe Efficacy Clinically the best in the group	Having greater success An advanced treatment Taking things to the next level An enlightened approach A specialized option	Patients aren't entrenched in the pain Not controlled by the pain Freedom from the constant reminder that they have cancer Not limited by the pain

Physician Insights to Positioning Statement (cont)

Comfortable	Proven	Product of Choice	Advance Their Approach	Freedom
"I like that you are acknowledging my comfort zone and my clinical experience…." *"That means I'm doing the best I can with the tools I have but at times I'm unsuccessful."*	Drawn to PROVEN because it encompasses the comfort & confidence that the drug will work & they will be protected.	Struggle to see *FENTORA* in the role as product of choice although they are more accepting of it playing this role in BTCP.	*"FENTORA is definitely a more advanced treatment. It is state of the art."*	Over-promise? Pain-free? Important goal

Budget / OPEX Back Up

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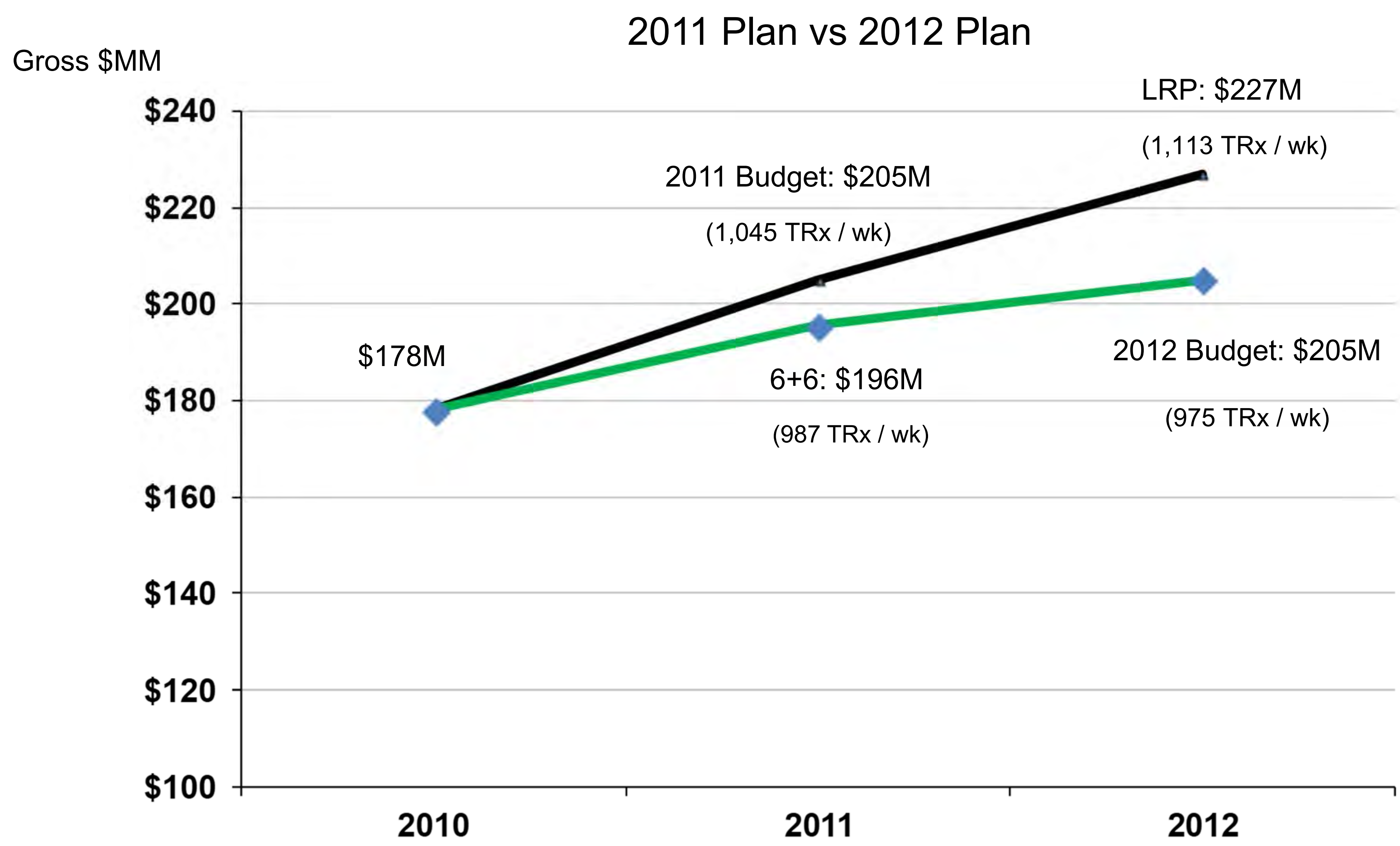
FENTORA Revenue Forecast



Fentora Strategic Map

TODAY

Effective yet underutilized brand

TOMORROW

First choice in BTCP for widespread number of physicians

Key Issues	*FENTORA* is not viewed as the treatment of choice for BTCP	Non clinical barriers hinder patient starts and retention (REMS, Complicated Dosing, Affordability)	Lack of clarity about where Fentora fits within pain management	Category shifting to TIRF may cause confusion	Small base of prescribing physicians
Strategies	**Highlight compelling data and unique Mechanism of Delivery as reason to believe Fentora is ideal BTCP choice**	**Target Office Managers/Nurses to champion Fentora and overcome obstacles**	**Highlight patient triggers for HCPs to recognize when to initiate Fentora therapy**	**OWN TIRF**	**Solidify prescribing base while also expanding prescribing universe**